

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Doc. # 08560217	
Substitute for Form PTO-975						
CLAIMS AS FILED - PART I						
(Column 1)		(Column 2)		SMALL ENTITY		OR
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		
BASIC FEE (37 CFR 1.18(a))				\$		
TOTAL CLAIMS (37 CFR 1.18(d))	minus 20 =		X \$			
INDEPENDENT CLAIMS (37 CFR 1.102(d))	minus 3 =		X \$			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.14(f))			+			
			TOTAL			
* If the difference in column 1 is less than zero, enter "0" in column 2.						
CLAIMS AS AMENDED - PART II						
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		OR
Total (37 CFR 1.14(a))		minus		RATE		OTHER THAN SMALL ENTITY
Independent (37 CFR 1.14(b))		minus		ADDITIONAL FEE		OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		TOTAL ADD'L FEE		OR
Total (37 CFR 1.14(a))		minus		RATE		OTHER THAN SMALL ENTITY
Independent (37 CFR 1.14(b))		minus		ADDITIONAL FEE		OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		TOTAL ADD'L FEE		OR
Total (37 CFR 1.14(a))		minus		RATE		OTHER THAN SMALL ENTITY
Independent (37 CFR 1.14(b))		minus		ADDITIONAL FEE		OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		TOTAL ADD'L FEE		OR
Total (37 CFR 1.14(a))		minus		RATE		OTHER THAN SMALL ENTITY
Independent (37 CFR 1.14(b))		minus		ADDITIONAL FEE		OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(c))		TOTAL ADD'L FEE		OR

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.
** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.118. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Communications for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9129 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

09/560217

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	7/18/67	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 66	Minus	** 67 =
	Independent	* 7	Minus	*** 8 =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
	Independent	*	Minus	*** =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
	Independent	*	Minus	*** =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	150.00	OR	BASIC FEE	300.00
X\$ 25=		OR	X\$50=	
X100=		OR	X200=	
+180=		OR	+360=	
TOTAL		OR	TOTAL	

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 25=		OR	X\$50=	
X100=		OR	X200=	
+180=		OR	+360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 25=		OR	X\$50=	
X100=		OR	X200=	
+180=		OR	+360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 25=		OR	X\$50=	
X100=		OR	X200=	
+180=		OR	+360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	